

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10630572  
APPLICANT(S)

FILING DATE

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		2				
4		2				
5		2				
6		1				
7		1				
8		1				
9		1				
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12		1				
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14		1				
15		1				
16		1				
17		2				
18		2				
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20		1				
21		2				
22	1	2				
23		1				
24		1				
25		3				
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TOTAL IND.	2					
TOTAL DEP.	32					
TOTAL CLAIMS	34					
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